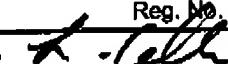
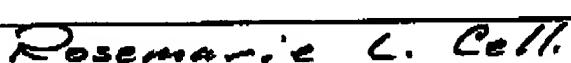
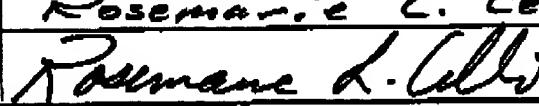


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/724,570
		Filing Date	November 28, 2000
		First Named Inventor	Schenk, Dale B.
		Art Unit	1647
		Examiner Name	Nichols, Christopher J.
Total Number of Pages in This Submission	16	Attorney Docket Number	015270-005914US

ENCLOSURES (Check all that apply)					
<input checked="" type="checkbox"/> Fee Transmittal Form (1 page, submitted in duplicate) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (12 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>				Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Townsend and Townsend and Crew LLP Rosemarie L. Celli		
Signature			
Date	Reg. No. 42,397 August 20, 2004		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9306 on August 20, 2004.			
Typed or printed name			
Signature		Date	Aug. 20, 2004

60280719 v1

FEET TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 420

Complete if Known

Application Number	09/724,570
Filing Date	November 28, 2000
First Named Inventor	Schenk, Dale B.
Examiner Name	Nichols, Christopher J.
Art Unit	1647
Attorney Docket No.	015270-005914US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)
 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	590	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		Extra Claims		Fee from below	Fee Paid
		**	=		
Independent Claims					
Multiple Dependent					

Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)		
1202 18	2202 8	Fee Description	
1201 86	2201 43	Claims in excess of 20	
1203 280	2203 145	Independent claims in excess of 3	
1204 86	2204 43	Multipile dependent claim, if not paid	
1305 18	2205 8	** Reissue independent claims over original patent	

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

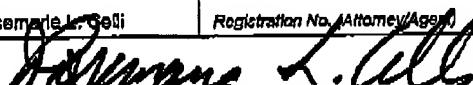
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	Fee Description	Fee Paid
1051	180	2051 65	Surcharge - late filing fee or oath
1052	50	2052 25	Surcharge - late provisional filing fee or cover sheet
1053	180	1053 130	Non-English specification
1812	2,520	1812 2,520	For filing a request for reexamination
1804	920*	1804 920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805 1,840*	Requesting publication of SIR after Examiner action
1251	110	2251 55	Extension for reply within first month
1252	420	2252 210	Extension for reply within second month
1253	950	2253 475	Extension for reply within third month
1254	1,480	2254 740	Extension for reply within fourth month
1255	2,010	2255 1,005	Extension for reply within fifth month
1401	330	2401 185	Notice of Appeal
1402	330	2402 185	Filing a brief in support of an appeal
1403	290	2403 145	Request for oral hearing
1451	1,610	1451 1,610	Petition to institute a public use proceeding
1452	110	2452 55	Petition to revive - unavoidable
1453	1,330	2453 665	Petition to revive - unintentional
1801	1,330	2801 665	Utility issue fee (or reissue)
1502	480	2502 240	Design issue fee
1503	840	2503 320	Plant issue fee
1460	180	1480 180	Petitions to the Commissioner
1807	50	1807 50	Petitions related to provisional applications
1806	160	1806 180	Submission of Information Disclosure Stmt
8021	40	8021 40	Recording each patent assignment per property (times number of properties)
1809	770	2809 385	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	770	2810 385	For each additional invention to be examined (37 CFR § 1.129(b))
1801	770	2801 385	Request for Continued Examination (RCE)
1802	900	1802 800	Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

(\$420)

Complete if applicable

Name (Print/Type)	Rosemarie L. Celi	Registration No. / Attorney/Agent	42,387	Telephone	650-326-2400
Signature				Date	August 20, 2004

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